



STATE OF IOWA

CHESTER J. CULVER, GOVERNOR
PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
EUGENE I. GESSOW, DIRECTOR

February 6, 2009

GENERAL LETTER NO. 3-E-2

ISSUED BY: Division of Field Operations

SUBJECT: Employees' Manual, Title 3, Chapter E, ***RESTRAINT AND SECLUSION
POLICY FOR MHIs***, pages 2 and 3 revised.

Summary

The definition of "physical restraint" is revised. Physically holding an individual to administer a medication to carry out a required medical procedure against the individual's wishes is now considered a physical restraint. Physically holding an individual who has given consent and requests being physically held is not considered restraint.

Effective Date

Upon receipt.

Material Superseded

Remove from Employees' Manual, Title 3, Chapter E, pages 2 and 3, dated February 10, 2006, and destroy them.

Additional Information

Refer questions about this general letter to the deputy director for field operations.

Definitions

“Ambulatory restraint” means the use of restraints such that a consumer is still able to walk and move from one place to another while in restraints.

“Consumer” is any patient admitted to and treated by the mental health institute.

“Chemical restraint” means a medication that is used to control extreme behavioral symptoms during an emergency. A drug used as a restraint means any drug that:

- ◆ Is administered to manage a consumer behavior in a way that reduces the safety risk to the safety of the consumer or others;
- ◆ Has the temporary effect of restricting the consumer freedom of movement; and
- ◆ Is not a standard treatment for the consumer medical or psychiatric condition.

Chemical restraint *does not* include medications that comprise the consumer’s regular, prescribed medical regimen, which is part of the consumer’s treatment plan. Medicine that is used to control ongoing behavior is not considered chemical restraint. These medicines may have a “PRN” order or a single dose order.

“Emergency” means a situation in which:

- ◆ The consumer is in imminent risk of harming self or others, including staff;
- ◆ Non-physical interventions are not viable; and
- ◆ Safety issues require an immediate physical response.

An emergency occurs when the person:

- ◆ Threatens or otherwise shows intent of serious injury and
- ◆ There is reason to believe that the person will immediately carry out these intentions, or
- ◆ The person attempts an injury that would require immediate professional medical attention.

“Family” means those persons who play a significant role in the consumer’s life, which may include a person not legally related to the consumer receiving care. This person is often referred to as a surrogate decision-maker, if authorized to make care decisions for the consumer if he or she loses decision-making capacity.

“Four-point restraint” means the use of soft bracelets encasing the wrists and ankles of a consumer lying on a bed that are secured to the bed frame.

“Five-point restraint” means a four-point restraint with the addition of a strap that is placed around the consumer’s waist or chest and secured to the bed frame.

“Five-point restraint with bicep cuffs” means the use of five-point restraint with the addition of soft cuffs placed on the biceps of a consumer and secured to the bed frame.

“Gradual release” means the selective removal of certain restraints in order to evaluate the consumer’s mental and behavioral status.

“Medical order” means an order written by medical staff.

“Medical staff” means a physician, an advanced registered nurse practitioner, or a physician assistant.

“Physical restraint” means any approved manual method or physical or mechanical device, material, or equipment attached or adjacent to the consumer’s body that the consumer cannot easily remove that restricts the consumer’s freedom of movement or normal access to the consumer’s body. Physically holding a consumer, in order to administer a medication or carry out a required medical procedure (such as laboratory work) against the consumer’s wishes, is considered restraint.

However, a consumer may consent to an injection or procedure, but may not be able to hold still. In such circumstances, and at the consumer’s request, staff may “hold” the consumer in order to safely complete the procedure. This is not considered restraint.

“Prone restraint” means restraining a consumer in a face-down position where the front part of the consumer’s body lies upon the ground or other object or faces the ground for more than a few seconds.

“Protective measures” are used in association with medical conditions, when other adaptive or assistive devices are inadequate to enable a consumer to maintain posture, prevent injury to self or to achieve other medical purposes are not considered restraint. Protective measures, include but are not limited to:

- ◆ Geri chairs,
- ◆ Chairs with trays,
- ◆ Bed rails,
- ◆ Straps,
- ◆ Mitts, or
- ◆ Other devices that restrict freedom of movement or access to one’s body in order to prevent falls, maintain posture or for other medical purposes.